Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution. VO_{V-2}

COMMITTEE NAME	
Official Name of Committee	<003
Cross for Counal Street	
2115 Hughes Ave. City, State, Zip Code Ames, Ionra 50014	
City, State, Zip Code	
Ames, Ionsa 50014	
Area Telephone Code	
(515) 292-3058	
Effective date of dissolution:	
October 23	003
October 23 ,2 Contraction Signature of Treasurer	
Signature of Treasurer	
11-17-03	
Date Signed	
THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY: , the candidate, pertify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown or my committee's final report and all campaign property and leftover funds have been distributed in accordance with lowa Code section 66.42 and rule 351 IAC 4.42.	
Signature of Candidate Required for Candidate's Committee Date signed	
WHEN TO FILE:	(Rev. 02/02)
The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached. The final bank statement may be sent in later if it is not	NOTICE OF DISSOLUTION
available at the time the Notice of Dissolution is filed.	e Only
FOR INSTRUCTIONS, SEE BACK OF FORM This form is not applicable to statutory political committees.	
Certified Date	of Dissolution